COMMONWEALTH OF VIRGINIA DEPARTMENT OF SOCIAL SERVICES VIEW PROGRAM

Participant Name:	
Case No.:	

VIEW JOB SEARCH FORM

IMPORTANT! YOU HAVE BEEN ASSIGNED TO JOB SEARCH. USE THIS FORM TO RECORD THE CONTACTS YOU ARE REQUIRED TO MAKE WITH EMPLOYERS WHILE YOU ARE LOOKING FOR A JOB AND THE NUMBER OF HOURS FOR EACH CONTACT. IF YOU DO NOT COMPLETE AND SIGN THIS FORM, AND RETURN IT TO YOUR EMPLOYMENT SERVICES WORKER. YOUR TANF OR TANF-UP MAY BE TERMINATED!

EMPL	OYMENT SERVICES WORKER	, YOUR TANF	OR TANF-U	IP MAY	BE TERMINATED!	
**************************************		t the hours that or travel time botal.	you spend i etween into	in face- erviews	-to-face interviews, or hours completing and turnings (but not to the first interview or from the last	
Comp	olete this form and: Return this form with your signa	ture by			to your employment services worker listed below	
	Keep the interview scheduled with your employment services worker and bring your completed form for:					
		at	Time		at	
	Date		Time		Address	
FMPI	OYMENT SERVICES WORKER	! <u>.</u>			PHONE:	
resum		contact, you mi	ust have a fa	ace-to t	face interview or leave an application and/or a	
YOL	JR CONTACTS			DID YOU: (Check any that apply)		
Type Perso	e of job: on Contacted: of Contact:	MENT COMMISS		Result	Register: t of Contact:	
	act Hours (circle) 1 2 3 4			_		
Addr					Submit a Resume Submit an Application: Interview:	
Type of job: Person Contacted: Date of Contact:			Result of Contact:			
Cont	act Hours (circle) 1 2 3 4					

Company:	Submit a Resume
Address:	Submit an Application:
	Interview:
Type of job:	
Person Contacted:	Result of Contact:
Date of Contact:	result of contact.
Contact Hours (circle) 1 2 3 4	
·	
Company:	Submit a Resume
Address:	Submit an Application:
	☐ Interview:
Type of job:	
Person Contacted:	Result of Contact:
Date of Contact:	
Contact Hours (circle) 1 2 3 4	
Company:	☐ Submit a Resume
Address:	Submit an Application:
	Interview:
Type of job:	
	Result of Contact:
Person Contacted: Date of Contact:	Result of Contact.
Contact Hours (circle) 1 2 3 4	
Company:	Submit a Resume
Address:	Submit an Application:
	☐ Interview:
Type of job:	
Person Contacted:	Result of Contact:
Date of Contact:	
Contact Hours (circle) 1 2 3 4	
Company:	Submit a Resume
Address:	Submit an Application:
	☐ Interview:
Type of job:	
Person Contacted:	Result of Contact:
Date of Contact:	
Contact Hours (circle) 1 2 3 4	
Company:	☐ Submit a Resume
Address:	☐ Submit an Application:
	☐ Interview:
Type of job:	
Person Contacted:	Result of Contact:
Date of Contact:	
Contact Hours (circle) 1 2 3 4	
Company:	Submit a Resume
Address:	Submit a Resulte Submit an Application:
	Interview:
Tuno of ich	interview.
Type of job:	Described Contacts
Person Contacted:	Result of Contact:
Date of Contact:	
Contact Hours (circle) 1 2 3 4	
PARTICIPANT'S SIGNATURE	DATE

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